

# Bringing It All Back Home: The FIT Clinic and Transitional Healthcare in New Orleans



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From Chains to Change

# Disclosure

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I have no actual or potential conflict of interest in relation to this program/presentation.

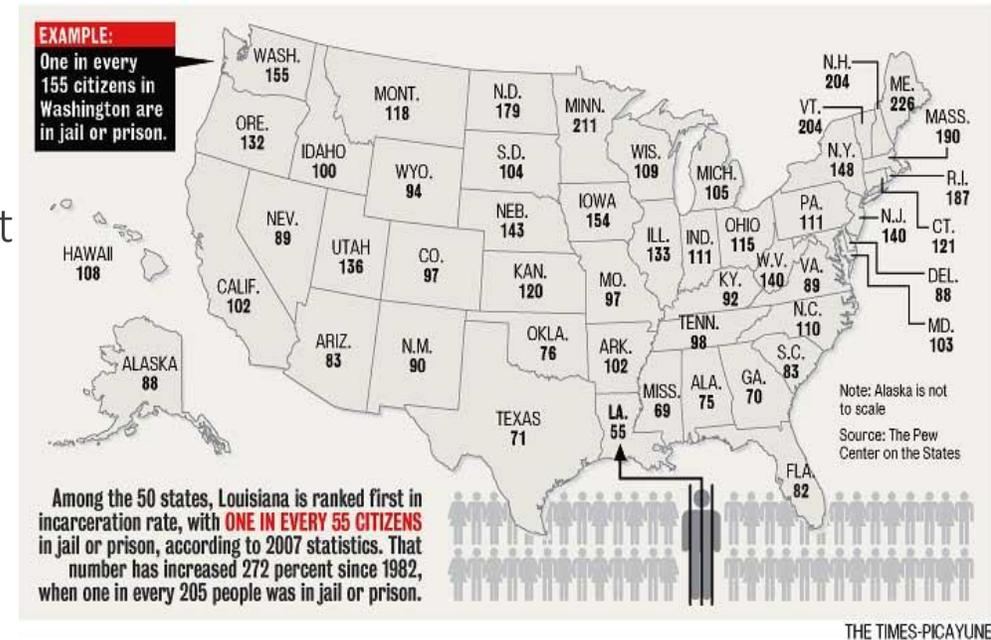
# Outline

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1. Background on how our work began
2. Needs of formerly incarcerated persons in Louisiana
3. Formerly Incarcerated Transition (FIT) clinic

# Background

- ❖ Highest incarceration rate in U.S.
  - ❖ 40,000 people or ~1.4% of adult population
  - ❖ 7,000+ people return to Orleans Parish annually
  - ❖ 70+% of people who are paroled have a chronic condition
  - ❖ 90+% of those incarcerated have no insurance at release
- ❖ Little is known about the unique transitional health and social support needs of FIPs in Louisiana
- ❖ Release of older prisoners with chronic conditions is increasingly common



# History of our partnership

## Tulane:

- ❖ Two medical students
- ❖ MD (IM and peds)
- ❖ PhD (community-based participatory research)
- ❖ Voice of the Ex-Offender
  - ❖ Norris Henderson
- ❖ Interviews
- ❖ Ruth U. Fertel / Tulane Community Health Center
- ❖ Student involvement



# Getting the whole picture meant asking FIPs what they wanted and needed

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- ❖ Partnered with a VOTE to ID FIPs in N.O.
- ❖ In-person, audio-recorded interviews
  - ❖ 24 AA men
  - ❖ Mean length of incarceration: 18 years (SD 9)
  - ❖ Mean time since release: 7.6 months (SD 8.5)
- ❖ Topics
  - ❖ Experiences/ barriers to receiving health care and during and post-incarceration
  - ❖ Desires for services and attitudes toward health and health care
- ❖ Interviews transcribed, coded

# What did we learn?

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- ❖ 20 men were on medications upon release
  - ❖ Range of medication given upon release (0-60 days) with a mean of 23 days (SD 17 days)
- ❖ 14 / 20 were not given Rx
- ❖ 15 /20 were not given a list of their medications
- ❖ 15 / 24 were not given a resource guide listing PC or specialty care for the uninsured
- ❖ 17 / 24 were given no sort of health counseling
- ❖ Only 1 FIP reporting having prison staff talk to him about signing up for coverage/insurance
- ❖ High desire for care

# What did we learn?

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- ❖ Little consistency in the process of care in prison, pre-release process
  - ❖ transportation to outside hospitals for 2<sup>nd</sup> care
  - ❖ colonoscopy schedule
  - ❖ influence of guard's in medical care
  - ❖ Invalid prescriptions
- ❖ Lack of trust
  - ❖ in the prison medical system
  - ❖ on the part of providers toward prisoners
- ❖ Highly motivated and self sufficient
- ❖ Limitations:
  - ❖ All data is self-reported
  - ❖ Women have not yet been interviewed
  - ❖ Correction staff absent

# The FIT (Formerly Incarcerated Transitions) Clinic

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- ❖ Opened in May of 2015
  - ❖ First transitional care clinic for FIPs in Louisiana
    - ❖ Housed within existing Federally Qualified Health Center
    - ❖ ½ day/ week
    - ❖ Sliding scale payment

*“I think they should have something set up in the system already where they could call them and transfer you. Instead of telling you might/could go here and might/could get medical care...If a clinic is set up for that, then there is no problem.”*

# Coordination with Louisiana prisons

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- ❖ Official primary care referral clinic for the state of Louisiana's release of Orleans parish bound FIPs
- ❖ Working on
  - ❖ standardizing release protocols
  - ❖ medical record exchanges
  - ❖ pre-release prison in-reach
  - ❖ Education

*"I think you need a liaison with the secretary of the DOC (Department of Corrections). That gives you access to the information of who are the newly released prisoners that are coming to work release and society that need medical treatment or need outpatient care or they need inpatient care once they get out."*

# Case management

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- ❖ Student run case management teams
  - ❖ Currently in transition to the next class
  - ❖ Different from “student-run clinics”
- ❖ With the help of clinic staff aids in
  - ❖ Insurance/coverage
  - ❖ Medication / Rx issues
  - ❖ Transportation
  - ❖ Secondary care referrals
  - ❖ Referrals to other city agencies
- ❖ Pedagogical – Social determinates and social work
- ❖ Street teams

*“How many people are prepared to go home? A person that didn’t prepare themselves to go home or a person that been in jail for 20 or 30 years, who didn’t prepare themselves to come home, who in most cases are institutionalized, now, return to a new found reality, and returning to that new found reality, society, responsibility, obligation, you know, you need to be debriefed. They need social work.”*

# Prisoner to Patient: PCORI grant

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- ❖ V.O.T.E. (Voice of the Ex-Offender)
- ❖ Women With A Vision
- ❖ Cease Fire: New Orleans
- ❖ Promise of Justice Initiative
- ❖ NOLA for Life: City of New Orleans
- ❖ LA Department of Corrections
- ❖ LSU and Tulane School of Medicine and Public Health
- ❖ And growing...

# The horizon...

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- ❖ Formerly incarcerated women's interviews
- ❖ Improving and sustaining the FIT model and research on its efficacy
- ❖ Integration of Community Health Workers into the FIT model
- ❖ Strengthen our ties and coordination efforts to the Louisiana Department of Corrections
- ❖ Research and QI



# Conclusions

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- ❖ **NO FUNDING AT THIS TIME!**
- ❖ Need financial support to sustain this work
- ❖ We believe our model will be cost effective
  - ❖ Prevent people from using ED after release
  - ❖ Support chronic disease management
  - ❖ Help prevent recidivism
- ❖ Join forces with other deep south and national efforts



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# Thank you!

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